

# PATENT COOPERATION TREATY

From the  
INTERNATIONAL PRELIMINARY EXAMINING AUTHORITY

# PCT

To:

WUYTS, Koenraad, Maria  
Koninklijke KPN N.V.  
P.O. Box 95321  
NL-2509 CH The Hague  
PAYS-BAS

## NOTIFICATION OF RECEIPT OF DEMAND BY COMPETENT INTERNATIONAL PRELIMINARY EXAMINING AUTHORITY

(PCT Rules 59.3(e) and 61.1(b), first sentence  
and Administrative Instructions, Section 601(a))

Date of mailing  
(day/month/year) 08-07-2005

Applicant's or agent's file reference  
402907W0

### IMPORTANT NOTIFICATION

International application No.  
PCT/EP2004/012955

International filing date (day/month/year)  
12/11/2004

Priority date (day/month/year)  
28/11/2003

Applicant

KONINKLIJKE KPN N.V. et al

1. The applicant is hereby notified that this International Preliminary Examining Authority considers the following date as the date of receipt of the demand for international preliminary examination of the international application:

24/06/2005

2. This date of receipt is:

- ☒ the actual date of receipt of the demand by this Authority (Rule 61.1(b)).  
☐ the actual date of receipt of the demand on behalf of this Authority (Rule 59.3(e)).  
☐ the date on which this Authority has, in response to the invitation to correct defects in the demand (Form PCT/IPEA/404), received the required corrections.

3. ☐ **ATTENTION:** That date of receipt is **after** the expiration of 19 months from the priority date. Consequently, in respect of some Offices, the demand does not have the effect of postponing the entry into the national phase until 30 months from the priority date (or later in some Offices) (Article 39(1)) and the acts for entry into the national phase must therefore be performed within 20 months from the priority date (or later in some Offices). However, in respect of some other Offices, the time limit of 30 months (or later) may nevertheless apply. See the Annex to Form PCT/IB/301 and, for details about the applicable time limits, Office by Office, see the *PCT Applicant's Guide*, Volume II, National Chapters and the WIPO Internet site.

- ☐ (If applicable) This notification confirms the information given by telephone, facsimile transmission or in person on:

- ☒ Referring to the above mentioned international application we kindly draw your attention to OJ EPO 11/2003, 574-576 and OJ EPO 05/2004, 305.

4. Only where paragraph 3 applies, a copy of this notification has been sent to the International Bureau.

Name and mailing address of the IPEA/

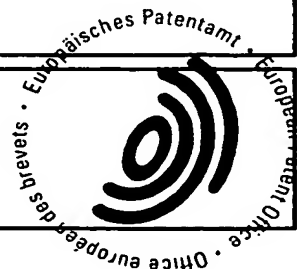


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## REQUEST

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### SA561231



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PCT/RO/2004/01/012955	
International Application No.	
(12.11.04)	12 NOV 2004
International Filing Date	
EUROPEAN PATENT OFFICE	
PCT INTERNATIONAL APPLICATION	
Name of receiving Office and "PCT International Application"	
Applicant's or agent's file reference (if desired) (12 characters maximum) 402907WO	

<b>Box No. I TITLE OF INVENTION</b> Call completion in an internet call waiting environment	
<b>Box No. II APPLICANT</b> <input type="checkbox"/> This person is also inventor	
Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence (if no State of residence is indicated below.) KONINKLIJKE KPN N.V. Maanplein 55 2516 CK THE HAGUE The Netherlands	
Telephone No. +31 70 4460678	
Facsimile No. +31 70 4460840	
Teleprinter No.	
Applicant's registration No. with the Office	
State (that is, country) of nationality: NL	State (that is, country) of residence: NL
This person is applicant for the purposes of: <input type="checkbox"/> all designated States <input checked="" type="checkbox"/> all designated States except the United States of America <input type="checkbox"/> the United States of America only <input type="checkbox"/> the States indicated in the Supplemental Box	
<b>Box No. III FURTHER APPLICANT(S) AND/OR (FURTHER) INVENTOR(S)</b>	
Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence (if no State of residence is indicated below.) SPROKKEREEF Ronald Beatrixplantsoen 90 2104 SV HEEMSTEDE The Netherlands	
This person is: <input type="checkbox"/> applicant only <input checked="" type="checkbox"/> applicant and inventor <input type="checkbox"/> inventor only (If this check-box is marked, do not fill in below.)	
Applicant's registration No. with the Office	
State (that is, country) of nationality: NL	State (that is, country) of residence: NL
This person is applicant for the purposes of: <input type="checkbox"/> all designated States <input type="checkbox"/> all designated States except the United States of America <input checked="" type="checkbox"/> the United States of America only <input type="checkbox"/> the States indicated in the Supplemental Box	
<input type="checkbox"/> Further applicants and/or (further) inventors are indicated on a continuation sheet.	
<b>Box No. IV AGENT OR COMMON REPRESENTATIVE; OR ADDRESS FOR CORRESPONDENCE</b>	
The person identified below is hereby/has been appointed to act on behalf of the applicant(s) before the competent International Authorities as: <input checked="" type="checkbox"/> agent <input type="checkbox"/> common representative	
Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country.) WUYTS Koenraad Maria Koninklijke KPN N.V. P.O. Box 95321 2509 CH THE HAGUE The Netherlands	
EPO - DG 1 22 12 2004 (37)	
Telephone No. +31 70 4460678	
Facsimile No. +31 70 4460840	
Teleprinter No.	
Agent's registration No. with the Office	
<input type="checkbox"/> Address for correspondence: Mark this check-box where no agent or common representative is/has been appointed and the space above is used instead to indicate a special address to which correspondence should be sent.	

BEST AVAILABLE COPY

The demand must be filed directly with the competent International Preliminary Examining Authority or, if two or more Authorities are competent, with the one chosen by the applicant. The full name or two-letter code of that Authority may be indicated by the applicant on the line below:

IPEA/ \_\_\_\_\_

IPEA EPO-OEB 001 Requi:  <b>24. 06. 2005</b>  11	DEMAND
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# PCT

## CHAPTER II

### DEMAND

under Article 31 of the Patent Cooperation Treaty:

The undersigned requests that the international application specified below be the subject of international preliminary examination according to the Patent Cooperation Treaty.

For International Preliminary Examining Authority use only	
Identification of IPEA <b>EP</b>	Date of receipt of DEMAND <b>24-06-2005</b>
<b>Box No. I IDENTIFICATION OF THE INTERNATIONAL APPLICATION</b>	
Applicant's or agent's file reference <b>402907WO</b>	
International application No. <b>PCT/EP2004/012955</b>	International filing date (day/month/year) <b>XX (12 November 2005)</b>
(Earliest) Priority date (day/month/year) <b>28 November 2003</b>	
Title of invention <b>Call completion in an internet call waiting environment</b>	
<b>Box No. II APPLICANT(S)</b>	
Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country.) <b>KONINKLIJKE KPN N.V.          Maanplein 55          2516 CK THE HAGUE          The Netherlands</b>	
Telephone No. <b>+31 70 4460678</b>	
Facsimile No. <b>+31 70 4460840</b>	
Teleprinter No.	
Applicant's registration No. with the Office	
State (that is, country) of nationality: <b>NL</b>	State (that is, country) of residence: <b>NL</b>
Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country.) <b>SPROKKEREEF Ronald          Beatrixplantsoen 90          2104 SV HEEMSTEDE          The Netherlands</b>	
State (that is, country) of nationality: <b>NL</b>	
State (that is, country) of residence: <b>NL</b>	
Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country.)    	
State (that is, country) of nationality:  	
State (that is, country) of residence:  	
<input type="checkbox"/> Further applicants are indicated on a continuation sheet.	

Form PCT/IPEA/401 (first sheet) (April 2005)

See Notes to the demand form

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**XX** CORRECTED EX OFFICIO BY IPEA  
 International Filing date 12. November 2004.

Sheet No. .2

International application No.  
PCT/EP2004/012955

## Box No. III AGENT OR COMMON REPRESENTATIVE; OR ADDRESS FOR CORRESPONDENCE

The following person is ☒ agent ☐ common representativeand ☒ has been appointed earlier and represents the applicant(s) also for international preliminary examination.☐ is hereby appointed and any earlier appointment of (an) agent(s)/common representative is hereby revoked.☐ is hereby appointed, specifically for the procedure before the International Preliminary Examining Authority, in addition to the agent(s)/common representative appointed earlier.Name and address: (Family name followed by given name; for a legal entity, full official designation.  
The address must include postal code and name of country.)WUYTS Koenraad Maria  
Koninklijke KPN N.V.  
P.O. Box 95321  
2509 CH THE HAGUE  
The Netherlands

Telephone No.

+31 70 4460678

Facsimile No.

+31 70 4460840

Teleprinter No.

Agent's registration No. with the Office

☐ Address for correspondence: Mark this check-box where no agent or common representative is/has been appointed and the space above is used instead to indicate a special address to which correspondence should be sent.

## Box No. IV BASIS FOR INTERNATIONAL PRELIMINARY EXAMINATION

## Statement concerning amendments:\*

1. The applicant wishes the international preliminary examination to start on the basis of:

☒ the international application as originally filedthe description ☒ as originally filed☐ as amended under Article 34the claims ☒ as originally filed☐ as amended under Article 19 (together with any accompanying statement)☐ as amended under Article 34the drawings ☒ as originally filed☐ as amended under Article 342. ☐ The applicant wishes any amendment to the claims under Article 19 to be considered as reversed.3. ☐ Where the IPEA wishes to start the international preliminary examination at the same time as the international search in accordance with Rule 69.1(b), the applicant requests the IPEA to postpone the start of the international preliminary examination until the expiration of the applicable time limit under Rule 69.1(d).4. ☐ The applicant expressly wishes the international preliminary examination to start earlier than at the expiration of the applicable time limit under Rule 54bis.1(a).

\* Where no check-box is marked, international preliminary examination will start on the basis of the international application as originally filed or, where a copy of amendments to the claims under Article 19 and/or amendments of the international application under Article 34 are received by the International Preliminary Examining Authority before it has begun to draw up a written opinion or the international preliminary examination report, as so amended.

Language for the purposes of international preliminary examination: English

☒ which is the language in which the international application was filed.☐ which is the language of a translation furnished for the purposes of international search.☐ which is the language of publication of the international application.☐ which is the language of the translation (to be) furnished for the purposes of international preliminary examination.

## Box No. V ELECTION OF STATES

The filing of this demand constitutes the election of all Contracting States which are designated and are bound by Chapter II of the PCT.

Sheet No. ...3

International application No.  
PCT/EP2004/012955

## Box No. VI CHECK LIST

The demand is accompanied by the following elements, in the language referred to in Box No. IV, for the purposes of international preliminary examination:

- |  |   |        |
|--|---|--------|
| 1. translation of international application                              | : | sheets |
| 2. amendments under Article 34   | : | sheets |
| 3. copy (or, where required, translation) of amendments under Article 19 | : | sheets |
| 4. copy (or, where required, translation) of statement under Article 19  | : | sheets |
| 5. letter  | : | sheets |
| 6. other (specify)   | : | sheets |

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Examining Authority use only  
received not received

<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>

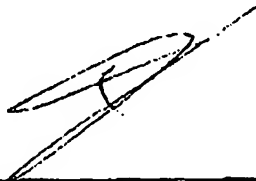
The demand is also accompanied by the item(s) marked below:

- |   |   |
|---|---|
| 1. <input checked="" type="checkbox"/> fee calculation sheet  | 5. <input type="checkbox"/> statement explaining lack of signature                  |
| 2. <input type="checkbox"/> original separate power of attorney                                     | 6. <input type="checkbox"/> sequence listing in electronic form                     |
| 3. <input type="checkbox"/> original general power of attorney                                      | 7. <input type="checkbox"/> tables in electronic form related to a sequence listing |
| 4. <input checked="" type="checkbox"/> copy of general power of attorney; reference number, if any: | 8. <input type="checkbox"/> other (specify):  |

## Box No. VII SIGNATURE OF APPLICANT, AGENT OR COMMON REPRESENTATIVE

Next to each signature, indicate the name of the person signing and the capacity in which the person signs (if such capacity is not obvious from reading the demand).

WUYTS Koenraad Maria



For International Preliminary Examining Authority use only

1. Date of actual receipt of DEMAND:

24-06-2005

2. Adjusted date of receipt of demand due to CORRECTIONS under Rule 60.1(b):

3. ☐ The date of receipt of the demand is AFTER the expiration of 19 months from the priority date and item 4 or 5, below, does not apply.  
☐ The applicant has been informed accordingly.
4. ☐ The date of receipt of the demand is WITHIN the time limit of 19 months from the priority date as extended by virtue of Rule 80.5.
5. ☐ Although the date of receipt of the demand is after the expiration of 19 months from the priority date, the delay in arrival is EXCUSED pursuant to Rule 82.

6. ☐ The date of receipt of the demand is AFTER the expiration of the time limit under Rule 54bis.1(a) and item 7 or 8, below, does not apply.
7. ☐ The date of receipt of the demand is WITHIN the time limit under Rule 54bis.1(a) as extended by virtue of Rule 80.5.
8. ☐ Although the date of receipt of the demand is after the expiration of the time limit under Rule 54bis.1(a), the delay in arrival is EXCUSED pursuant to Rule 82.

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Demand received from IPEA on: